PATENT APPLICATION FEE DETERMINATION RECORD  Effective December 29, 1999													
CLAIMS AS FILED - PART I (Column 1) (Column 2)									SMALL ENTITY TYPE OF			OTHER THAN R SMALL ENTITY	
FOR NUMB				ER FILED		NUMBER EXTRA		Г	RATE	FEE	1	RATE	FEE
BA	SIC FEE									345.00	OR		690.00
TC	TAL CLAIMS		1 20 minus 20=			. 100			X\$ 9=	1371	OR	X\$18≃	DZ\$/
INDEPENDENT CLAIMS minus 3 = '							Γ	X39=		OR	X78=		
MULTIPLE DEPENDENT CLAIM PRESENT								T	+130=	130	OR	+260=	20
* If the difference in column 1 is less than zero, enter "0" in column 2										1852	OR	TOTAL	27/4
CLAIMS AS AMENDED - PART II											,	OTHER	THAN
	(Column 1) (Column 2) (Column 3)							_:	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		REM	AIMS IAINING TER NDMENT		PR:	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA	L	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	,		Minus	**		=		X\$ 9=		OR	X\$18≃	
	Independent			Minūs	***	· · · · · · · · · · · · · · · · · · ·	=		X39=		OR	X78=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=		OR	+260=	
									TOTAL DIT, FEE		OR	TOTAL ADDIT, FEE	
		(Col	umn 1)		, .		,						
AMENDMENT B		REN Al	AIMS IAINING FTER NOMENT		PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	٠.	RATE	ADDI- TIONAL FEE
	Total	. 3	9	Minus	**	173	=		X\$ 9=		OR	X\$18=	
	Independent	• NTATIO	3 DN OF MI	Minus	***	S ENT CLAIM	=	Γ	X39=		OR	X78=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										OЯ	+260=	
)		V						AD	TOTAL DIT. FEE		OR	TOTAL ADDIT, FEE	
6 4 D (Column 1) (Column 2) (Column 3)													
AMENDMENT C		REM Al	AIMS IAINING FTER NDMENT		1 PR	IIGHEST IUMBER EVIOUSLY AID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. (	t0	Minus	**	173	=		X\$ 9=		OR	X\$18=	
	Independent		3	Minus	***	3	<u> </u>		X39=		OR	X78≈	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									+130=		OR	+260=	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										Ω.	TOTAL	
	If the "Highest Nu The "Highest Num	mber Pr	eviously P	aid For" IN THI	S SPA	CE is less tha	n 3, enter "3."	AU	DIT. FEE I in the ap	propriate bo	x in co	ADDIT. FEE lumn 1. 1317	690
	M PTO-875	ul.				162						17.	

FORM PTO-875 (Rev. 12/99)



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Application or Docket Number